

“A Quasi Experimental Study to Assess the Effectiveness of Structured Teaching Programme on HIV-AIDS Among adolescents in selected schools”

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ABSTRACT

Introduction- Human immune deficiency(HIV) attacks the bodies immune system, specifically the CD-4 cells [t-cells]. If left untreated, HIV reduces the number of CD-4 cells in the body, resulting in opportunistic infections or cancers because of a very weak immune system and signal that the person has Acquired Immuno Deficiency Syndrome (AIDS), the last state of HIV infection.

Materials and methods- Quasi experimental, STP was used. Total no. of adolescents i.e. 100 were selected. Data collected by structured knowledge questionnaire and analysis was done on the basis of objectives and hypothesis of the study.

Results- The findings of the study revealed that the overall knowledge mean was 17.09, mean percentage was 17.09% and SD was 18.22 respectively. The findings revealed that the knowledge level after giving STP was improved and the mean value was 23.23, mean percentage was 23.23% and SD was 16.41.

Conclusion- Knowledge of HIV-AIDS among adolescents is improved.

Key words- HIV-AIDS, knowledge, adolescents.

INTRODUCTION-

Help us find the way, to take Aids away!

Human immune deficiency(HIV) attacks the bodies immune system, specifically the CD-4 cells [t-cells]. If left untreated, HIV reduces the number of CD-4 cells in the body, resulting in opportunistic infections or cancers because of a very weak immune system and signal that the person has Acquired Immuno Deficiency Syndrome (AIDS), the last state of HIV infection.

Unlike some other viruses, the human body can't get rid of HIV completely. So, stays life-long. There is no cure for HIV infection or AIDS nor is there a vaccine to prevent HIV infection. However, new medications not only can slow the progression of infection, but can also markedly suppress the virus, thereby restoring the body's immune function and permitting many HIV- infected individuals to lead a normal disease free life.

India has the third largest HIV epidemic in the world. In 2013, HIV-AIDS prevalence in India was an estimated 0.3% equates to 2.1 million people living with HIV-AIDS.

An estimated 130,000 people died from AIDS-related illness in the same year. The first case report of HIV in India was occurred in 1986 from Chennai. Since then, there was an increase in number of HIV infections over the years.

Over 65 million people have been infected with HIV to date and AIDS has killed more than 25 million people since it was first recognized in 1981. An estimated 33.4 million people living with HIV/AIDS. Historically, the assumption of an active sexual life was thought to be situated in heterosexual monogamous relationship between young adults. This phenomena relatively bad life style creates a dangerous dilemma for many people who are engaging unprotected sex. Mostly adolescents and young people represent a growing share of people living with HIV-AIDS worldwide. In 2016 alone, 610,000 young people between the ages of 15-24 were newly infected with HIV-AIDS of whom 260,000 were adolescents between the ages of 15 and 19.

Additionally, HIV-AIDS-related deaths among adolescents have increased over the past decade

while decreasing among all other age groups, which can be largely attributed to a generation of children infected with HIV-AIDS perinatally who are growing into adolescents. In Uttarakhand, total cases of HIV positive individuals are 5,700 people according to government records. These are the cases that have been reported from across 2002 and 2015. The total number of people living with HIV (PLHIV) in India is estimated at 21.17 Lakhs in 2015.

PROBLEM STATEMENT

“A quasi experimental study to assess the effectiveness of structured teaching programme on HIV-AIDS among adolescents in selected schools”.

OBJECTIVES OF THE STUDY-

The Objectives of this study are-

- To assess the knowledge of HIV- AIDS among adolescents in selected schools, Haldwani.
- To evaluate the effectiveness of structured teaching programme on HIV-AIDS among adolescents in selected schools Haldwani.
- To find out the associations between post-test knowledge score of HIV- AIDS with their demographic variables among adolescents in selected schools, Haldwani.

MATERIAL AND METHODS-

Research design-

The research design incorporates the most important methodology. Our research design is quasi experimental research design.

Research setting-

The physical location for study is G.I.C (Kathgariya).

Sampling criteria-

➤ INCLUSIVE CRITERIA

- Students of Class 11th and Class 12th having knowledge of Hindi and English.
- Students of Class 11th and Class 12th under the age group of 16-18 years.

➤ EXCLUSIVE CRITERIA

- Students of Class 11th and Class 12th who are not willing to participate.
- Students who are not present during the study.

Sample size-

The sample size is '100'.

Sampling technique

Non randomization technique is the type of probable sampling was found appropriate for the study.

Development of tools

The tools are the major aspects for accessing the knowledge level of the samples. It consists of two parts-

PART I- Consist of socio demographic variables.

PART II- Comprised of questionnaires regarding knowledge about HIV-AIDS.

LEVEL OF KNOWLEDGE	RANGE OF SCORE
HIGH	21-30
MEDIUM	11-20
LOW	1-10

Data collection procedure

On one day, pre-test was conducted by using structured knowledge questionnaire after obtaining the consent within 30 minutes. On another day, structured teaching programme was done and on the same day post-test was conducted.

RESULTS

The findings of the study revealed that the overall knowledge mean was 17.09, mean percentage was 17.09% and SD was 18.22 respectively. The findings revealed that the knowledge level after giving STP was improved and the mean value was 23.23, mean percentage was 23.23% and SD was 16.41.

Table No.1- Overall comparison between pre-test and post-test mean, mean%, SD AND paired-t test.

S.no	Comparison	Pre-test	Post-test	Paired-t test value	Table value	df	Inference
(1)	Mean	17.09	23.23	21.08	1.98	9	Significant at 0.05 level
(2)	Mean%	17.09%	23.23%				
(3)	SD	18.22	16.41				

Table No. - Shows overall comparison in between pre-

test and post-test mean, mean%, SD and paired-t test.

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